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**TESTIMONY RAISED Bill No.1070: AN ACT CONCERNING SCHOOL NURSE STAFFING  
AND ESTABLISHMENT OF A SCHOOL NURSE ADVISORY COUNCIL**

PUBLIC HEALTH COMMITTEE

March 20, 2013

Good Day Senator Gerratana, Representative Johnson and esteemed members of the Public Health Committee

Thank-you for the opportunity to provide testimony on behalf of the Connecticut Nurses' Association (CNA) related to the Nurse licensure Compact. I am Mary Jane Williams Ph.D., RN current chairperson of Government Relations Committee for the Connecticut Nurses Association and professor emeritus from Central Connecticut State University.

I speak in strong support of **RAISED Bill No.1070: AN ACT CONCERNING SCHOOL NURSE STAFFING AND ESTABLISHMENT OF A SCHOOL NURSE ADVISORY COUNCIL**

The Connecticut Nurses Association has for many years worked with the School Nurses on issues related to safe practice and adequate staffing. Representative Peggy Sayers called a group of leaders together to discuss issues around School Nurses. It was an excellent opportunity to educate and inform leadership of the issues related to the safe practice of school nurses. However, even with Representatives Sayers knowledge, commitment and time we have been unable to move forward an agenda for School Nurses that addresses the many issues faced by school nurses in school settings. We have held meetings with representatives of the State Board of Education and we have

still not been able to move forward. I recognize the basic issue is economic, however in view of the school demographics, inclusion and the demands placed on all members of the health team in schools I believe it is time for positive action. It is also time to put the responsibility with local boards. Local boards have the responsibility for decisions related to school nurses employed and must answer to their constituents.

Raised Bill No. 1070 **AN ACT CONCERNING SCHOOL NURSE STAFFING AND ESTABLISHMENT OF A SCHOOL NURSE ADVISORY COUNCIL**, places responsibility for adequate School Nurse Staffing exactly where it belongs, with the Board of Education in the respective community. Reporting to the Department of Public Health also provides the correct message to our communities. The assessment, education and care provided by qualified school nurses directly relates to public health. Public schools with adequate school nurse staffing are the providers who interact with our children daily. Research demonstrates their value in the school settings. It should be noted “Healthy Children have better outcomes” and “Schools with school nurses have lower absenteeism.”

We need to support the work of this group of professional.

Hopefully an advisory committee recommendations, combined with community involvement will motivate the Boards of Education to act responsibly by adequately staffing schools with qualified individuals who will keep our children safe and healthy.

I urge you to support this Bill. I have included as an addendum the National Associations of School Nurses Position Paper on Staffing for your review. Thank you for your careful consideration of this most important legislation. Thank you for your anticipated support of this important issue.

**The National Association of School Nurses makes the following recommendations.**

It is the opinion of the National Association of School Nurses (NASN) and the National Association of State School Nurse Consultants (NASSNC) that adequate staffing of registered, professional school nurses in all schools is of critical importance in order to provide safe, effective, and timely care for all students. The pressure to reduce both health and education budgets have led to school nurse staff and programs being eliminated. A 2012 questionnaire by the National Association of School Nurse Consultants (NASSNC) found that 55% of the state school nurses consultants who responded reported that some school nursing positions have been dissolved or replaced with unlicensed staff, medical assistants, emergency medical technicians, certified nursing assistants or volunteers. Therefore the school is without a school nurse to attend to the health needs of students or to supervise unlicensed personnel staffing health rooms. Additionally, the questionnaire found that 68% of respondents reported that school nurses and others have provided medication administration training to unlicensed staff in districts where there are no school nurses to provide services (NASSNC, 2012).

It is recommended that we increase the number of School Nurses as student health needs are increasing.

NASN believes every child should have access to a school nurse.

Appropriate school nurse staffing is essential to the delivery of quality care and positive student health outcomes (ANA, 2005a).

School nurses are the health experts in schools, with the education and experience in pediatrics and public health to provide safe nursing care for students. School nurses work within the scope and standards of school nursing practice (ANA/NASN, 2011).

Nurses are the most trusted health professionals in the US, with eighty-one percent of Americans consistently expressing that they believe nurses' honesty and ethical standards are high or very high (Jones, 2010).

## RATIONALE

NASN and NASSNC believe that it is critically important that:

Students with access to school nurses have better school attendance and lower dismissal rates than students who do not have access (Pennington & Delaney, 2008). Student absenteeism has a direct association with poor academic performance (Weismuller, Grasska, Alexander, White, & Kramer, 2007).

Students with special health care needs require nursing, instructional and behavioral support, and may need an Individual Education Plan (IEP) or Section 504 Plan to access a free and appropriate education in the least restrictive environment (Forrest, Bevans, Riley, Crespo & Thomas, 2011).

School nurses are essential members of the school team to determine and implement the accommodations required for success (Kruger, Toker, Radjenovic, Comeaux, & Macha, 2009).

Students with special health care needs benefit from school nursing care and case management as they are at greater risk for lower student engagement, bullying, disruptive behaviors that affect social competence and lower academic achievement (Forrest et al., 2011).

School nurses are equal partners with other school professionals (ANA, 2012) in determining the health needs of students and the level of nursing care needed based on data, student and community health assessments and health conditions in order to ensure safe care and positive student health outcomes.

School nurses are the school professionals best prepared to determine the level of nursing care in school for the 19.2% (14.2 million) school-aged children with chronic health conditions involving special health care needs (Bethell et al., 2011).

School nurses in schools with adequate staffing have more direct student contact, greater involvement in developing the IHP (Individual Healthcare Plan) and IEP, regular contact with providers, and provide care for children with complex health conditions (Kruger et al., 2009). School nurses promote a healthy environment in school and in the

community by identifying health issues via screenings, health assessments, health promotion activities, and health education (Schoessler, 2011).

School nurses must be the health professional with oversight and implementation of the medication administration process in compliance with individual state laws and regulations.

Medication administration to children is a very serious role for the school nurse as medication errors in children potentially result in greater harm than to adults (Gonzales, 2010).

School nurses have a unique contribution to offer concerning children's health and safety whether through advocacy efforts or standards of practice. For example, school nurses use their skills and judgment to detect and refer for treatment potential vision deficits in students, enabling students to learn (Basch, 2011).

School nurses have the education and training to serve as healthcare team leaders and should, and are often required, to provide supervision and direction if a LPN/LVN is utilized as a member of the school health care team. The extent of nursing tasks that can be performed by the LPN or LVN is determined by each state's scope of practice and standards and/or applicable state specific statutes (ANA, 2005b). In many states the LPN/LVN must work in a team relationship with a registered professional nurse.

Medicaid and private health insurers benefit from the disease management and preventive health care services provided by school nurses. Schools alone cannot continue to subsidize the health care needs of students - Medicaid and private insurers must step forward and meet their responsibility.

Adopted: May 2012

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